

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 7 OF 25  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)  
Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee  
Square One Consulting, LLC

Date

MM / DD / YYYY  
10 / 18 / 2012

Mailing Address

1382 Berkeley Ave.

Amount

City

State

Zip Code

St. Paul , MN 55105

27.90

Purpose of Expenditure

Minutes for Phone Banking

Category/  
Type 004

Office Sought:

☒ House

State: CA

☐ Senate

District: 24

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Calendar Year-To-Date Per Election  
for Office Sought

9,882.41

Disbursement For:

☐ Primary

☒ General 12

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Ogilvy Public Relations World Wide

Date

MM / DD / YYYY  
10 / 23 / 2012

Mailing Address

1414 K Street, Suite 300

Amount

City

State

Zip Code

Sacramento , CA 95814

400.00

Purpose of Expenditure

Consulting for Online Advertisement

Category/  
Type 004

Office Sought:

☒ House

State: CA

☐ Senate

District: 24

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Calendar Year-To-Date Per Election  
for Office Sought

9,882.41

Disbursement For:

☐ Primary

☒ General 12

☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
Ogilvy Public Relations World Wide

Date

MM / DD / YYYY  
10 / 23 / 2012

Mailing Address

1414 K Street, Suite 300

Amount

City

State

Zip Code

Sacramento , CA 95814

133.34

Purpose of Expenditure

Consulting for Online Advertisement

Category/  
Type 004

Office Sought:

☒ House

State: CA

☐ Senate

District: 26

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Julia Brownley

Calendar Year-To-Date Per Election  
for Office Sought

10,389.97

Disbursement For:

☐ Primary

☒ General 12

☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures .....

561.24

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....  
(carry total from last page forward to Line 7)

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